

## CARDIGANSHIRE COUNTY COUNCIL



ANNUAL REPORT  
of the  
MEDICAL OFFICER OF HEALTH  
and  
PRINCIPAL  
SCHOOL MEDICAL OFFICER  
for the year 1963

I. MORGAN WATKIN, PH.D. (Lond.), M.Sc., M.B., B.Ch., D.P.H (Wales)  
County Medical Officer,  
Principal School Medical Officer.

SWYDDFA'R SIR,  
COUNTY OFFICE,  
ABERYSTWYTH

*Tel. Nos. : ABERYSTWYTH 7581—9*



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## CARDIGANSHIRE COUNTY COUNCIL.

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Chairman 1963-64—Councillor B. J. DAVIES

Chairman 1962-63—Alderman Mrs. G. C. EVANS, J.P.

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### HEALTH COMMITTEE—

Chairman 1962-64—Councillor the Rev. T. PUGH JARMAN

and all Members of the Council.

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### HEALTH SUB-COMMITTEE—

Chairman 1962-64—Councillor the Rev. T. PUGH JARMAN

plus 16 members of the Council and two representatives of the Local Medical Committee.

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### MENTAL HEALTH SUB-COMMITTEE—

Chairman 1962-64—Councillor the Rev. T. PUGH JARMAN

plus 7 members of the Council plus 2 members of Education Committee plus 3 co-opted members.

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### AMBULANCE SUB-COMMITTEE

Chairman 1962-64—Councillor the Rev. T. PUGH JARMAN

plus 14 members of the Council, together with 3 representatives appointed by the St. John Ambulance Association ; 1 by the British Red Cross Society ; 2 by the Medical Profession ; 1 by the Llandysul Ambulance Committee and 1 by the New Quay Ambulance Committee.

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### BRYNTIRION HOUSE COMMITTEE

Chairman 1961-64—Councillor JOHN LEWIS

plus 9 members of the Council and 1 co-opted member.

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### COUNTY EDUCATION COMMITTEE

Chairman 1961-64—Alderman W. M. DAVIES, J.P.

plus all members of the County Council and 10 co-opted members.

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There is no School Health Committee as such and all health questions are considered by the appropriate sub-committees of the Education Committee.

## Health Officers of the Authority.

County Medical Officer and Principal School Medical Officer ...	1. MORGAN WATKIN, PH.D. (Lond.), M.Sc., M.B., B.Ch., D.P.H. (Wales).
Deputy County Medical Officer and Deputy Principal School Medical Officer ... ..	JOSEPH R. JONES, B.Sc., M.B., B.Ch. (Wales), D.P.H. (Liverpool), D.R.C.O.G.
Assistant Medical Officers ...	GWEN BEVAN, B.Sc. (Wales), M.R.C.S. (Eng.), L.R.C.P. (Lond.).
...	BERYL EVANS JONES, M.B., B.Ch. (Wales), D.C.H. (London).
Principal School Dental Officer ...	W. D. PERCIVAL EVANS, J.P., L.D.S., R.C.S. (Eng.).
School Dental Officers ...	E. BYRON LLOYD, L.D.S., R.C.S. (Eng.). S. D. NEALE, L.D.S., B.D.S.
Chief Nursing Officer ...	MRS. A. M. DUDLEY-THOMAS, S.R.N., S.C.M., T.B. CERT., H.V. CERT.
Deputy Chief Nursing Officer ...	Miss A. E. DAVIES, S.R.N., S.C.M., H.V. Cert.
Public Health Inspector ...	EVAN RICHARDS, A.A.L.P.A., M.R.S.I., CERT. S.I.B.
Social Worker ... ..	Miss GWYNETH RHŶS, Dip. Social Science.
Mental Welfare Officers ...	J. R. EVANS, Aberystwyth (full time) T. ALUN EVANS, Aberaeron (part time) J. H. JOHNS, Cardigan (part time)
Assistant Supervisors for Mental Health ... ..	Miss D. M. BEYNON, Dip. N.A.M.H. Miss E. GRIFFITHS, Dip. N.A.M.H.
Home Help Organiser ...	Miss M. G. REES.
Assistant Home Help Organiser ...	Miss E. V. BLACKWELL.
County Analyst ...	D. C. JENKINS, M.Sc., F.R.I.C., F.C.S.
Ambulance Sub-Controller ...	J. C. BLAYNEY (Officer of the Order of St. John), F.I.A.O.
Health Visitors ... .. (each holding the H.V. certificate of the Royal Sanitary Institute)	Miss D. M. DAVIES, J.P., S.R.N., S.C.M. Miss VALMAI DAVIES, S.R.N., S.C.M. Miss C. HUGHES EVANS, S.R.N., S.C.M. (Commenced 1/10/63). Mrs. M. N. ARFON JONES, S.R.N., S.C.M. (Resigned 20/12/63). Miss N. N. JONES, S.R.N., S.C.M. Miss D. J. MORGAN, S.R.N., S.C.M. Miss M. MORGAN, S.R.N., S.C.M. Miss N. MORGAN, S.R.N., S.C.M. (Commenced 1/10/63). Miss M. MORRIS, S.R.N., S.C.M. Mrs. S. E. MORRIS, S.R.N., S.C.M. Mrs. ELUNED PHILLIPS, S.R.N., S.C.M. Miss MARY STEWART, S.R.N., S.C.M. (Commenced 29/7/63).
Orthopaedic Sister ...	Mrs. WINIFRED KOLCZAK, S.R.N., O.N.C.

- ... NURSE A. B. ATKINS, S.R.N., S.C.M., Aberaeron
- NURSE D. BEVAN, S.R.N., S.C.M., Llanfarian
- NURSE S. E. BOAST, S.R.N., Cardigan
- NURSE G. E. BOORE, S.R.N., S.C.M., Llandysul
- NURSE M. BOWEN, S.R.N., S.C.M., Llangranog
- NURSE A. DAVIES, J.P., S.C.M., Henllan
- NURSE A. DAVIES, S.C.M., Llanrhystud
- NURSE E. H. DAVIES, S.R.N., S.C.M., Lampeter
- NURSE R. S. DAVIES, S.R.N., S.C.M., Llanarth
- NURSE S. J. DAVIES, S.R.N., S.C.M., Pontrhydfendigaid
- NURSE J. H. DINGLEY, S.R.N., S.C.M., Aberystwyth
- NURSE S. M. EASTWOOD, S.R.N., Devil's Bridge
- NURSE B. EBENEZER, S.R.N., S.C.M., Llangeitho
- NURSE B. EDWARDS, S.R.N., S.C.M., Cardigan  
(Resigned 26/9/63).
- NURSE E. M. A. EDWARDS, S.R.N., S.C.M., Tregaron.
- NURSE N. EDWARDS, S.R.N., S.C.M. (County Relief)  
(Resigned 31/5/63).
- NURSE D. ESAU, S.R.N., S.C.M., Aberporth
- NURSE M. E. EVANS, S.R.N. (County Relief).
- NURSE M. H. EVANS, S.R.N., S.C.M., Llanbadarn
- NURSE M. M. EVANS, S.R.N., S.C.M., Glandyfi
- NURSE S. H. EVANS, S.R.N. (County Relief)
- NURSE SULWEN EVANS, S.R.N., Llanwenog  
(Commenced 6/3/63).
- NURSE M. E. T. GWYNNE, S.C.M. (County Relief).
- NURSE J. A. HARRHY, S.C.M., Mid-Aeron
- NURSE M. A. JAMES, S.R.N. (Temporary Relief)  
(Commenced 29/8/63)
- NURSE M. E. JARMAN, S.C.M. (County Relief).
- NURSE E. J. JOHN, S.R.N., S.C.M. (County Relief).
- NURSE D. E. JONES, S.R.N., S.C.M., Lleechryd
- NURSE E. M. JONES, S.R.N., S.C.M., Llanafan  
(Resigned 14/11/63).
- NURSE GLADYS JONES, S.R.N., S.C.M., Melindwr.

NURSE I. M. JONES, S.R.N., Aberystwyth  
 NURSE VERA JONES, S.C.M., Cardigan  
 NURSE K. LEE, S.R.N. (County Relief)  
 Nurse E. A. LEWIS, J.P., S.R.N., S.C.M., Rhydlewis  
 NURSE M. M. MORGAN, S.C.M., Talybont  
 NURSE G. MORRIS, S.R.N., Llanafan  
 (Commenced 21/1/63).  
 NURSE E. E. NORTHAM, S.R.N., Aberystwyth.  
 NURSE E. A. G. OWEN, S.R.N., S.C.M. (County Relief)  
 (Commenced 7/5/63)  
 NURSE M. E. PINCHIN, S.R.N., S.C.M.  
 (Resigned 30/11/63).  
 NURSE R. M. REES, S.R.N., S.C.M., New Quay.  
 NURSE FRANKLIN THOMAS, S.R.N., (County Relief)  
 NURSE M. G. THOMAS, S.R.N., S.C.M., Rhydyppennau.  
 NURSE D. WALTERS, S.R.N., S.C.M., Lampeter.

Dental Attendants	...	...	Mrs. D. M. WATSON, S.R.N. Miss MIRIAM THOMAS Miss W. A. P. MILLS (Commenced 22/4/63) Miss LYNN EVANS (Commenced 9/9/63)
Consultant Educational Psychologist (part time)			CYRIL B. E. JAMES, Ph.D., B.A., B.Ed., A.B.Ps.S.
Speech Therapist (part time)	...		Mrs. B. EDWARDS.
Chief Clerk	...	...	D. OLIVER MORGAN.

**Officers of the Regional Hospital Board who provide Specialist Services for the County Council.**

Chest	...	...	...	D. LLEWELYN DAVIES, M.R.C.S. (Eng.) ; L.R.C.P. (Lond.) J. T. JONES, B.Sc., M.B., B.Ch. (Wales) G. O. THOMAS, M.D. (L'pool) ; M.B., Ch.B. (L'pool)
Ophthalmic	...	...	...	T. EVANS JONES, M.R.C.S. (Eng.) ; L.R.C.P. (Lond.) ; D.O.M.S. (Eng.)
Orthopaedic	...	...	...	I. L. MACFARLANE, F.R.C.S. (Eng.) ; M.Ch. (Ortho.) (L'pool)
Ear, Nose and Throat	...	...	...	SALATHIEL MORGAN, M.B., B.Ch. (Wales) ; F.R.C.S. (Edin.)
Hon. Consultant Psychiatrist			...	SIDNEY DAVIES, M.B., B.S. (Lond.), D.P.M.
Psychiatry	...	...	...	JOHN FARR, M.B., B.S. (Lond.) ; D.P.M. (Eng.) E. J. EURFYL JONES, M.A. (Oxon.) ; B.M., B.Ch. (Wales) ; D.P.M. (Eng.)
Psychiatry (Sub-normal)	...	...	...	MICHAEL J. CRAFT, M.D. (Lond.), M.B., B.S., M.R.C.P.Ed., D.P.M. (Eng.)
Child Psychiatry...	...	...	...	J. McDONALD, M.A. (Glas.), M.B., Ch.B., D.P.M. (Eng.)
Geriatrics	...	...	...	J. C. DAVIES, M.B., B.S. (Durh.), M.R.C.P.Ed. (Newc.)



## To the Chairman and Members of the Health Committee

I have pleasure in presenting the Annual Report of the Health Department for the year which ended on December 31st, 1963.

A considerable expansion of the Health Services in the county is envisaged in the 10-Year Plan. During the year under review, work was commenced on the new Junior Training Centre at Felinfach and the contract awarded for a new comprehensive clinic at Aberystwyth. Other improvements agreed upon are a new clinic and ambulance station at Lampeter and a new ambulance headquarters at Aberystwyth. Additions to the medical and health visiting staff were agreed but although the recruitment of health visitors in this county presents no difficulty, the same is not true of the recruitment of doctors.

The mental health services are becoming increasingly hard-pressed. Whereas formerly a patient who was removed to hospital stayed there for a long period of time, he is now discharged after a short interval and frequently requires re-admission at a later stage. During the period of stay in the community, the patient needs support from the local health authority and when an exacerbation occurs, a mental officer often has to take steps to re-admit him to hospital. As the mental hospital serving the area is at Carmarthen—50 miles away from the County Offices—a considerable amount of time is spent in travelling. In the case of subnormal patients, the distance covered is even greater, for most of the cases have of late been admitted to Oakwood Park Hospital, near Conway.

The mental health hostel at Tregaron continues to justify its existence. In fact the demand for beds is so great that an extension has been recommended as a matter of urgency. Although no permanent matron has been appointed to replace Miss Davies, the Council has been fortunate in obtaining the services of Mrs. Worthington, a former matron of the Aberystwyth General Hospital.

The demands made upon the ambulance service continue to increase both on the accident and on the general side. The increase in road casualties and accidents on the many building sites in the north of the county in particular account for the increase in the number of emergency calls. The appointment of every new consultant in the Mid-Wales or the West Wales Hospital Management Committee areas means that more patients require to be transported to and from hospital either as in-patients or as out-patients.

During the year the St. David's Mental Hospital Management Committee terminated its existence and a new body was formed from its remnants and from those of the West Wales Hospital Management Committee. The new body assumed the name of South-West Wales Hospital Management Committee and in agreement with modern trends became responsible for the day to day administration of both general and mental hospitals in West Wales.

Health education in a rural area always presents a problem. During the year, one of the Department's health visitors was awarded a World Health Organisation Fellowship to study *inter alia* health education methods in the Scandinavian countries. The experience gleaned was later put to good use in Cardiganshire.



Further details of the work of the Health Department are given in the ensuing pages. Dr. J. R. Jones, the Deputy County Medical Officer, deals in detail with the mental health services and with the diabetic survey of which he has taken day-to-day charge and Mr. Percival Evans, the Principal Dental Officer, contributes a section on dental health. Mr. Evan Richards, the County Public Health Inspector, deals in detail with the sanitary circumstances in the area.

I am glad to be able to report that 1963 presented no major public health problem in Cardiganshire and that the health of the community continues to be good.

I. MORGAN WATKIN,

*County Medical Officer.*

TABLE I

Section 1—STATISTICS

AREA, POPULATION AND RATEABLE VALUE OF THE COUNTY

	Aberaeron Urban District	Aberystwyth Borough	Cardigan Borough	Lampeter Borough	New Quay Urban District	Aberaeron Rural District	Aberystwyth Rural District	Telaside Rural District	Tregaron Rural District	Total for County
Area in acres     ...     ...	388	1,141	4,928	1,754	281	99,321	140,728	73,102	121,546	443,189
Population (1961 Census)     ...     ...	1,209	10,427	3,789	1,855	954	9,014	11,227	10,358	4,815	53,648
Population Mid-1963 (Registrar General's Estimate)     ...     ...	1,190	10,360	3,740	2,010	910	8,950	11,210	10,160	4,730	53,260
Rateable Value at 1st April, 1963     ...	£38,795	£377,684	£101,873	£65,796	£28,829	£104,622	£194,381	£151,071	£57,650	£1,120,701
Rateable Value at 1st April, 1964     ...	£39,263	£388,572	£105,042	£67,316	£29,171	£106,213	£202,316	£169,681	£58,573	£1,166,147
Sum represented by ld. rate 1963-64	£150	£1,500	£413	£263	£110	£397	£761	£668	£226	£4,488
Estimated sum represented by ld. rate 1964-65     ...     ...	£153	£1,550	£405	£268	£110	£418	£775	£659	£228	£4,566

TABLE 2

## VITAL STATISTICS

## MOTHERS AND INFANTS

*Live births*

Number	...	...	...	...	...	757
Rate per 1,000 population	...	...	...	...	...	14.21

*Illegitimate Live Births* (per cent of total live births) ... 5.81

*Stillbirths*

Number	...	...	...	...	...	17
Rate per 1,000 total live and stillbirths	...	...	...	...	...	21.96

*Total Live and Stillbirths* ... 774

*Infant Deaths* (deaths under one year) ... 15

*Infant Mortality Rates*

Total infant deaths per 1,000 total live births...	...	19.81
Legitimate infant deaths per 1,000 legitimate live births	...	21.03
Illegitimate infant deaths per 1,000 illegitimate live births	...	—

*Neo-natal Mortality Rate* (deaths under four weeks per 1,000 total live births) ... 13.21

*Early Neo-natal Mortality Rate* (deaths under one week per 1,000 total live births) ... 11.88

*Peri-natal Mortality Rate* (stillbirths and deaths under one week combined per 1,000 total live and still births) ... 33.59

*Maternal Mortality* (including abortion)

Number of deaths	...	...	...	...	—
Rate per 1,000 total live and still births	...	...	...	...	—

TABLE 3  
CAUSES OF DEATH

<i>Registrar General's Code Number</i>	<i>Cause of Death</i>	<i>Number of Deaths</i>		<i>Total</i>
		<i>Male</i>	<i>Female</i>	
1	Tuberculosis, respiratory ...	2	3	5
2	Tuberculosis, other ...	—	—	—
3	Syphilitic disease ...	—	1	1
4	Diphtheria ...	—	—	—
5	Whooping cough ...	—	—	—
6	Meningococcal infections ...	—	—	—
7	Acute poliomyelitis ...	—	—	—
8	Measles ...	—	—	—
9	Other infective and parasitic diseases ...	—	2	2
10	Malignant neoplasm, stomach ...	17	19	36
11	Malignant neoplasm, lung, bronchus ...	22	2	24
12	Malignant neoplasm, breast ...	—	12	12
13	Malignant neoplasm, uterus ...	—	4	4
14	Other malignant and lymphatic neoplasms ...	31	27	58
15	Leukaemia, aleukaemia ...	3	—	3
16	Diabetes ...	3	2	5
17	Vascular lesions of nervous system ...	48	74	122
18	Coronary disease, angina ...	84	49	133
19	Hypertension with heart disease ...	7	7	14
20	Other heart disease ...	53	91	144
21	Other circulatory disease ...	14	16	30
22	Influenza ...	—	—	—
23	Pneumonia ...	10	24	34
24	Bronchitis ...	20	8	28
25	Other diseases of respiratory system ...	4	1	5
26	Uleer of stomach and duodenum ...	—	1	1
27	Gastritis, enteritis and diarrhoea ...	1	5	6
28	Nephritis and nephrosis ...	2	4	6
29	Hyperplasia of prostate ...	7	—	7
30	Pregnancy, childbirth, abortion ...	—	—	—
31	Congenital malformations ...	2	4	6
32	Other defined and ill-defined diseases ...	24	36	60
33	Motor vehicle accidents ...	1	1	2
34	All other accidents ...	10	11	21
35	Suicide ...	7	—	7
36	Homicide and operations of war ...	—	—	—
Total ...		372	404	776

TABLE 4

## CAUSES OF DEATH IN AGE GROUPS

	Under 4 weeks		4 weeks and under 1 year		1—		5—		15—		25—		35—		45—		55—		65—		75 and over		TOTAL	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Tuberculosis, respiratory	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	3
Tuberculosis, other ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Syphilitic disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal infections	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other infective and parasitic diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malignant neoplasm, stomach...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malignant neoplasm, lung, bronchus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malignant neoplasm, breast	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malignant neoplasm, uterus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other malignant and lymphatic neoplasms	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Leukaemia, aleukaemia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diabetes	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Vascular lesions of nervous system	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Coronary disease, angina	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Hypertension with heart disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other heart disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other circulatory disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Influenza ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Bronchitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other diseases of respiratory system	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ulcer of stomach and duodenum	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Gastritis, enteritis and diarrhoea	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Nephritis and nephrosis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Hyperplasia of prostate	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pregnancy, childbirth, abortion	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congenital malformations	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other defined and ill-defined diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Motor vehicle accidents	3	5	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
All other accidents	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Suicide	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Homicide and operations of war	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	3	7	1	4	1	1	1	1	5	1	2	3	3	3	20	15	58	41	112	98	166	229	372	401

TABLE 5  
TABLE OF INFECTIOUS DISEASES (EXCLUDING TUBERCULOSIS) NOTIFIED DURING THE YEAR

Sanitary District	Population Census 1961	Population Estimated 1963	Cholera	Diphtheria	Dysentery (amoebic and bacillary)	Encephalitis Lethargica	Erysipelas	Food Poisoning	Malaria	Measles	Meningococcal Infection	Ophthalmia Neonatorum	Paratyphoid Fever	Plague	Pneumonia (Acute Primary and Influenza)	Acute poliomyelitis	Acute poliomyelitis encephalitis	Puerperal pyrexia	Relapsing Fever	Scarlet Fever	Typhoid Fever	Typhus Fever	Whooping Cough
URBAN : Aberaeron ...	1209	1190	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Aberystwyth ...	10427	10360	—	—	1	—	—	—	—	34	—	—	2	—	—	—	—	—	—	2	—	—	—
Cardigan ...	3789	3740	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—
Lampeter ...	1855	2010	—	—	—	—	—	—	—	56	—	—	—	—	—	—	—	—	—	2	—	—	—
New Quay ...	954	910	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
RURAL : Aberaeron ...	9014	8950	—	—	—	—	—	—	—	21	—	—	—	—	—	—	—	—	—	—	—	—	—
Aberystwyth ...	11227	11210	—	—	—	—	—	—	—	36	—	—	2	—	—	—	—	—	—	1	—	—	—
Telfside ...	10358	10160	—	—	1	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—
Tregaron ...	4815	4730	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total ...	53648	53260	—	—	1	—	—	—	—	149	—	—	4	—	—	—	—	—	—	—	6	—	—



# TUBERCULOSIS NOTIFICATIONS, 1963, IN AGE GROUPS.

TABLE 6

## PULMONARY.

DISTRICT	0—		1—		2—		5—		10—		15—		20—		25—		35—		45—		55—		65—		75—		TOTAL
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Aberaeron Urban	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Aberystwyth Boro.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	1	—	—	1	2	1	8
Cardigan Borough...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1
Lampeter Borough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
New Quay Urban ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Aberaeron Rural ...	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	—	—	—	1	—	—	—	—	3
Aberystwyth Rural	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	1	1	1	—	2	—	—	—	7
Teifside Rural ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	1	1	—	1	—	4
Tregaron Rural ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1
Whole County ...	—	—	—	—	—	—	—	—	—	—	—	—	1	—	2	—	2	3	—	2	2	3	2	3	3	1	24

TABLE 7

## NON-PULMONARY

District	0—		1—		2—		5—		10—		15—		20—		25—		35—		45—		55—		65—		75—		TOTAL
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Aberaeron Urban ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Aberystwyth Boro.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Cardigan Borough...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Lampeter Borough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
New Quay Urban ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Aberaeron Rural ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1
Aberystwyth Rural	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	2
Teifside Rural ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tregaron Rural ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whole County ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	—	1	2	3	—	6

## Section 2

### CARE OF MOTHERS AND YOUNG CHILDREN

#### Ante-Natal Clinics

In view of the prevailing circumstances in Cardiganshire it is not the policy of the local health authority to run ante-natal clinics. At present ante-natal clinics are held under the aegis of the hospital at the Maternity Home, Aberystwyth. They are under the supervision of Dr. Geoffrey Williams, the consultant obstetrician. Domiciliary midwives, whenever possible, accompany the patients to the ante-natal clinics and health visitors give educational talks and film displays on matters connected with childbirth and the care of the infant. Relaxation exercises are held under the aegis of the hospital physiotherapist. This dual arrangement has been worked out in collaboration with the consultant obstetrician and the scheme is running satisfactorily.

At Glangwili Hospital, Carmarthen, the consultant obstetrician for West Wales also holds ante-natal clinics. These facilities are over and above those available to expectant mothers through their family doctor.

#### Care of Unmarried Mothers and their Children

Arrangements are usually made through the St. David's Diocesan Moral Welfare Committee for the confinement and care of unmarried mothers. Unmarried mothers may be admitted to a hostel outside Cardiganshire for some months before a confinement is due and kept for some time afterwards. The committee also assists in making suitable arrangements for the child.

Other expectant mothers leave home and go to London and the Midlands to seek refuge. Here they apply to the local authority for assistance and the latter contact Cardiganshire as the county of normal residence for a grant towards their maintenance.

#### Child Welfare

The contract for the Aberystwyth clinic has been awarded and it is hoped that in about 18 months' time, the Health Department will have a purpose built unit overlooking the putting green off North Road. The clinic will house a child guidance unit as well as provide for maternity and child welfare and dentistry.

The details of infant welfare clinics held in the county may be seen from the following page :—

<i>Centre</i>	<i>Where held</i>	<i>Day held</i>	<i>Total No. of infant attendances in the year</i>	<i>Average No. of infant attendances per session</i>	<i>Total No. of Sessions held</i>
Aberaeron	Memorial Hall, Aberaeron	2nd & 4th Friday in each month	277	12.04	23
Aberporth	Village Hall, Aberporth	1st Thursday in each month	156	17.33	9
Aberystwyth	Swyddfa'r Sir, Aberystwyth	Every Wednesday & Thurs. afternoons	1,762	17.10	103
Borth	Memorial Hall, Borth	Every other Thursday in each month	346	16.47	21
Cardigan	County Primary School, Cardigan	Every other Tuesday in each month	457	18.28	25
Lampeter	Ormond House, Lampeter	Every other Tuesday in each month	156	6.50	24
Llanbadarn	Church Hall, Llanbadarn	2nd & 4th Monday in each month	172	7.48	23
Llandysul	Graig Vestry, Llandysul	1st & 3rd Tuesday in each month	229	9.95	23
Llangranog	The Castle, Pontgarreg	3rd Monday in each month	27	3.37	8
Llechryd	Capel Isaf Vestry, Llechryd	2nd Tuesday in each month	37	3.08	12
New Quay	Memorial Hall New Quay	1st Monday in each month	25	1.78	14
Penparcau	Neuadd Goffa, Penparcau, Aberystwyth	1st, 3rd and 5th Friday in each month	348	12.00	29
Penrhiwllan	The Hall, Penrhiwllan	2nd & 4th Tuesday in each month	292	12.69	23
Taliesin	Old Schoolroom, Taliesin	Every other Thursday in each month	143	6.50	22
Tregaron	Memorial Hall, Tregaron	1st & 3rd Tuesday in each month	467	17.96	26
Parellyn	The Vestry, Parellyn	3rd Thursday in each month	168	14.00	12
Ponterwyd	Ysgol Syr John Rhys, Ponterwyd	2nd Friday in each month	72	9.00	8
*Ysbyty Ystwyth	C.P. School Ysbyty Ystwyth	2nd Wednesday in each month	25	6.25	4
TOTAL			5,159	12.61	409

\*—Commenced 11/9/63.

### Care of Premature Infants.

Each district midwife is supplied with a Cestra Premature Baby Outfit. Other specialised equipment for treating the baby at home and for transporting it to hospital is borrowed, by arrangement, from the Maternity Home, Aberystwyth.

Number of premature infants born at home	...	...	2
Transferred to hospital	...	...	1
Died within the first 24 hours	...	...	Nil
Died within the first 28 days	...	...	Nil

## Dental Care.

The following data have been supplied by Mr. W. D. Percival Evans, the Principal Dental Officer.

The dental care of expectant and nursing mothers and of pre-school children is under the supervision of the Principal Dental Officer of the Authority. Full treatment is provided, including artificial dentures.

The following tables show the numbers treated and the type of treatment given during the year.

	No. of persons examined	No. who commenced treatment during year	No. of courses of treatment completed during year
Expectant and nursing mothers	46	—	46
Children under five ...	75	67	48

Forms of dental treatment provided :—

	<i>Scal- ings and gum treat- ment</i>	<i>Fill- ings</i>	<i>Silver Nitrate treat- ment</i>	<i>Crowns or Inlays</i>	<i>Extract- ions</i>	<i>General Anaes- thetics</i>	<i>Dentures provided</i>		<i>Radio- graphs</i>
							<i>Full Upper or Lower</i>	<i>Partial Upper or Lower</i>	
Expectant & nursing mothers ...	9	38	—	—	130	26	10	9	7
Children under five..	4	34	28	—	170	51	—	—	—

## Welfare Foods.

The amount of welfare foods issued during the period can be seen from the following table :—

Commodity	Van	Clinic	Voluntary Distributors
National Dried Milk (tins) ... ..	3,471	4,274	5,596
Cod Liver Oil (bottles) ... ..	269	322	105
A. and D. Tablets (packets) ... ..	316	169	20
Orange Juice (bottles) ... ..	4,299	3,047	1,599

Details of bulk supplies received up to the end of the year are shown in the following table :—

Commodity	Quantity
National Dried Milk (tins) ... ..	12,640
Cod Liver Oil (bottles) ... ..	324
A. and D. Tablets (packets) ... ..	460
Orange Juice (bottles) ... ..	8,280

The amount of welfare foods issued during the year from the van at the various distribution centres is shown below :—

Centre	National Dried Milk	Cod Liver Oil	A. & D. Tablets	Orange Juice
Aberacron ... ..	110	7	1	120
Aberystwyth ... ..	2,289	195	235	2,909
Cardigan ... ..	150	22	36	369
Lampeter ... ..	240	33	30	495
Llandysul ... ..	494	8	7	128
Tregaron ... ..	188	4	7	278
TOTAL ... ..	3,471	269	316	4,299



### **Family Planning Clinic.**

A Family Planning Clinic under the aegis of the Family Planning Association is held at Aberystwyth. Sessions are held on the second and fourth Thursday of each month at Aberystwyth Hospital from 7.15 p.m.—8.30 p.m.

### **Child Life Protection.**

The duties in connection with Child Life Protection are undertaken by the Care of Children Committee. Close liaison is maintained with the Children's Officer who notifies the Health Department of all children under five supervised by her. These are then visited by the health visitor.

### **Nurseries and Child Minders.**

No premises or persons are registered in Cardiganshire under the Nurseries and Child Minders Regulations, 1948.

### **Juvenile Courts**

A report upon the health of all juveniles appearing in court is prepared in accordance with Section 35 of the Children and Young Persons Act, 1933. Medical reports where appropriate are submitted in accordance with Section 11 (iv) of the Summary Jurisdiction (Children and Young Persons) Rules, 1933.

## **Section 3.—MIDWIFERY**

The Supervisor of Midwives received notification of intention to practise from 22 midwives in institutions and 34 domiciliary midwives. Refresher courses were taken by ten local authority midwives. The Supervisor paid 99 visits to domiciliary midwives and 8 to institutional midwives.

Eighty eight births were delivered by domiciliary midwives and 727 by midwives in institutions.

It is the policy of the consultant obstetrician for Mid-Wales to have as many women as possible delivered in hospital. In view of the inaccessible nature of a large number of habitations in Cardiganshire, he feels that delivery in hospital, where every modern facility is available in the event of an unexpected emergency, is of paramount importance. As the number of hospital beds is limited, a substantial number of mothers have to be discharged home before the tenth day in order that this policy may be pursued.

## **Section 4.—HEALTH VISITING**

The Council employs eleven whole-time health visitors who also act as school nurses. Recruitment has, so far, presented no difficulty in Cardiganshire. Indeed the county is in the happy position of having several applicants for each advertised post.

Following a meeting of the Cardiganshire Local Medical Committee it was decided, for a trial period of one year, to ask each health visitor to get into contact with the family doctors in her area if she has not already done so. This was to enable her to



offer such assistance as was within her power and her available time. In practice several difficulties have arisen. Firstly, the practices of Cardiganshire doctors spread in peculiar fashion and there are few, if any, areas which are the exclusive preserve of the local doctor. As a consequence, contact has to be made with a number of doctors. Secondly, doctors tend to look to the district nurse rather than to the health visitor for assistance. Thirdly, with the heavy load of school work and various types of clinics which have to be carried out at fixed times, health visitors are not able to devote much time to general practitioners.

In Cardiganshire it is the district nurse rather than the health visitor who visits cases discharged from hospital. Exceptions are children and cases of mental disorder. In the former case the health visitors co-operate with the district nurses. The latter cases are usually dealt with by the social workers and the mental welfare officers.

A detailed account of the work of the health visitors is given in the ensuing table :

#### REPORT OF HEALTH VISITORS/SCHOOL NURSES FOR THE YEAR 1963

AREA	Infant Visits (0—5 years)	CLINICS ATTENDED			No. of visits to T.B., Blind, Orthopaedic, Mentally Defective Persons	SCHOOL WORK		
		Eye	M. & C.W.	All Others		No. of Visits to Schools	No. of children examined	No. of Children found verminous or suffering from Minor Ailments
Aberystwyth Urban	1,423	—	103	8	22	34	2,035	24
Aberystwyth Rural (Part) ...	2,230	—	140	15	66	35	1,261	56
Aberystwyth Rural (South) ...	1,051	—	12	48	81	84	2,436	56
Aberystwyth Rural (North) ...	1,210	—	56	19	7	124	3,663	36
Aberaeron ...	1,507	—	23	17	86	166	5,795	30
Cardigan ...	1,653	—	49	12	223	111	7,491	78
Lampeter ...	1,118	—	24	2	255	211	8,659	74
Llandysul ...	1,105	—	46	5	68	105	3,478	16
Llangranog ...	1,449	—	29	2	85	69	2,258	16
Tregaron ...	1,345	—	26	12	38	147	3,498	31
Total ...	14,091	—	508	140	931	1,086	40,574	417

## Section 5—HOME NURSING

The total number of nursing visits in 1963 was 61, 258, of which 10,403 were carried out by relief nurses. A re-arrangement of nursing areas was begun during the year with a view to evening out the case load. Before 1948, the size of district nursing areas had been dictated more by the financial resources of a particular locality than by nursing need. The opportunity was, therefore, taken of presenting a detailed scheme to the Council as a result of which district nurses in the county would have, on an average, a comparable amount of work. The Council accepted the plan submitted and, so far, the scheme has worked smoothly.

Recruitment of a resident nurse in the Ponterwyd/Devil's Bridge area has failed but the area has nevertheless been covered by nurses from adjoining districts taking over part of the work in turn.

### **Sick Leave**

Eight nurses had a total of 905 days off for sickness, maternity or compassionate leave.

The following table gives details of the work of the district nurses.

TABLE 13

## REPORT OF DISTRICT NURSE/MIDWIVES FOR THE YEAR 1963

DISTRICT	No. of births attended		No. of premature births attended		No. of cases delivered in hospitals but discharged and attended by domic. midwives before 10th day	Total midwifery and maternity nursing visits	Total number of cases nursed during the year	No. of children under 5 years at time of 1st visit during year	No. of persons over 65 years at time of 1st visit during year	Total nursing visits
	Live	Still	Live	Still						
Aberystwyth Centre ... ..	10	—	—	—	51	777	115	3	47	1,414
Penparcau & part Llanbadarn	8	—	—	—	38	565	108	2	31	1,851
Aberystwyth North ... ..	—	—	—	—	28	370	164	—	56	2,127
Aberaeron ... ..	5	1	—	—	24	265	109	—	45	1,390
Aberporth ... ..	7	—	—	—	39	455	233	2	32	1,886
Cardigan : St. Dogmaels	4	—	—	—	24	482	167	6	38	1,746
Verwig ... ..	—	—	—	—	43	496	321	9	90	2,572
Devil's Bridge ... ..	—	—	—	—	8	145	115	4	17	1,225
Glandyfi ... ..	—	—	—	—	13	133	120	4	25	2,330
Henllan ... ..	3	—	—	—	31	381	68	3	22	1,331
Lampeter : Silian ... ..	4	—	—	—	21	359	338	21	62	1,487
Cellan ... ..	6	—	—	—	25	331	262	26	29	2,167
Llanafan (part Llanilar)	—	—	—	—	15	93	285	21	72	1,560
Llanarth ... ..	2	—	—	—	13	169	301	16	35	2,310
Llandysul ... ..	3	—	1	—	25	278	119	3	27	1,336
Llanfarian (part Llanilar)	—	—	—	—	28	209	226	21	85	1,975
Llangeitho ... ..	5	—	—	—	12	208	108	6	18	1,756
Llangrannog ... ..	5	1	—	—	18	262	235	6	79	1,746
Llanrhystyd ... ..	1	—	—	—	21	204	209	10	44	1,398
Llanwenog ... ..	3	—	—	—	24	185	123	9	12	1,189
Llechryd ... ..	3	—	—	—	18	225	143	3	43	1,843
Melindwr ... ..	—	—	—	—	20	239	235	9	38	1,764
Mid-Aeron ... ..	2	—	—	—	14	135	268	12	52	1,574
New Quay ... ..	4	—	—	—	12	186	207	2	115	1,477
Pontrhydfendigaid ... ..	—	—	—	—	12	119	138	4	41	1,606
Rhyd Lewis ... ..	3	—	—	—	19	273	264	4	21	1,829
Rhydyppennau ... ..	2	—	—	—	28	222	143	10	42	1,625
Talybont ... ..	3	—	—	—	21	238	146	8	49	2,156
Tregaron ... ..	2	—	—	—	19	221	165	9	69	2,185
Relief ... ..	—	—	—	—	—	—	—	—	—	10,403
TOTALS ... ..	85	2	1	—	664	8,225	5,435	233	1,336	61,258



## Section 6—PREVENTION OF BREAK-UP OF FAMILIES

Problem families are regularly visited by health visitors and, when the need arises, by the district welfare officers. In special cases, the health visitor calls in the Chief Nursing Officer, who, in turn, may call in the County Medical Officer.

Consultation with the Children's Officer of the County Council, the County Welfare Officer, the District Medical Officer and the County Medical Officer on the one hand, together with the chairmen of the appropriate committees and the local member on the other, takes place as and when the need arises.

The problems facing this type of family almost invariably find their way to the Home Help Advisory Committee. It is usually found that the provision of adequate home help to a harassed mother who may be below par, is the most effective and economical method of dealing with many problem families.

## Section 7—VACCINATION AND IMMUNISATION

### Smallpox Vaccination

In normal times this is carried out entirely by general practitioners. Records of the 158 successful vaccinations and re-vaccinations carried out in 1963 are as follows

<i>Age</i>	<i>Number successfully vaccinated</i>	<i>Number successfully re-vaccinated</i>
Under 1 year old ...	16	—
1 year old ...	43	—
2—4 years ...	2	4
5—14 years ...	3	5
15+ ...	20	65

The number of registered live births for the year 1963 was 757 so that at the end of the year an estimated 2.11 % of children under a twelvemonth had been vaccinated.

### Diphtheria Immunisation

478 children were immunised and 39 booster injections given during the year, principally by general practitioners. The percentage of Cardiganshire children under a twelvemonth who were immunised was 22.62.

### Poliomyelitis Vaccination

The following vaccinations were carried out during the year ended 31st December, 1963 :

<i>Salk</i>	<i>Oral</i>
1st Injections ... 6	1 Dose ... 214
2nd Injections ... 111	2 Doses ... 145
3rd Injections ... 72	3 Doses ... 601
4th Injections ... 124	Reinforcing doses ... 638
Total ... 313	Total ... 1,598

Of the above totals, the following figures relate to the work done by general practitioners.

Salk (1st & 2nd Injections) ...	91
Oral (3 doses) ...	103
Reinforcing Doses (Salk & Oral) ...	316
Total ...	510

The total numbers of vaccinations carried out since the scheme started are shown below :

Number who received course of 4 injections	...	3,752
Number who received course of 3 injections	...	14,698
Number who received course of 2 injections	...	13,129

Clinics were held at the following centres :—

Aberystwyth	Cardigan	Lampeter
Aberaeron	Llandysul	Tregaron

### Whooping Cough Immunisation

Number of children who have completed a primary course (normally 3 injections) of pertussis vaccine (singly or in combination) in the Authority's area during the year ended 31st December, 1963.

Year of birth	Number of children
1963	167
1962	246
1961	37
1960	4
1959	3
1954—1958	3
1949—1953	—
Total	460

In addition, 20 children were given reinforcing doses.



## Section 8—AMBULANCE SERVICE

The County Council Health Department maintains eight ambulances which are stationed as follows :—

Aberystwyth	...	4 ambulances
New Quay ...	...	1 ambulance
Lampeter ...	...	1 ambulance
Llandysul ...	...	1 ambulance
Cardigan ...	...	1 ambulance

One relief ambulance is kept at Aberystwyth, if not required at one of the other stations. Another Aberystwyth ambulance is mainly used for infectious disease.

Delivery was made of two new ambulances during the year ; a large Lomas/Commer four-stretcher vehicle and a smaller Land Rover dual purpose ambulance having a four wheel drive. The former was posted at Llandysul and the latter at New Quay.

The number of patients conveyed by the Cardiganshire ambulance service increased substantially from 11,977 in 1962 to 15,284 in 1963, and the number of journeys rose during the same period from 5,095 to 6,028. A further 3,447 patients were conveyed at the request of the Ambulance Service by private sitting cars.

The number of emergency calls continues to increase, a total of 1,077 having been received during the year. Helicopters were called in to assist on two separate occasions. The first case occurred in the upper Elan Valley near the Radnorshire border at a time when deep snowdrifts made it impossible to use any type of road transport. The second was an acute emergency occurring during the peak holiday traffic period. The first case was removed to Llanidloes hospital and the second to the Cardiff Royal Infirmary.

The principal incident occurred early on the morning of October 16th when an R.A.E. bus conveying the night shift to their homes ran off the road and collided with a house at Tremain. Nine persons were seriously injured, one of whom died later in hospital. The assistance of the fire service had to be obtained to release some of the trapped victims. Ambulances from Cardigan, Llandysul, and the R.A.E. Aberporth were used to convey the injured to Cardigan and Glangwili Hospitals.

The Joint Buildings Committee has agreed to erect a new ambulance headquarters on the County Office yard site. Land has also been obtained for a new ambulance station at Lampeter and tenders for the work have now been invited.

**TABLE 14**

	1961	1962	1963
Number of patients conveyed	11,947	11,977	15,284
Number of journeys made ...	4,924	5,095	6,028
Mileage covered ...	165,620	172,621	185,987

**Ambulance Details, 1963**

Station	Total number of patients conveyed	Emergency	Non-emergency	Number of journeys made	Mileage covered
Aberystwyth	9,902	466	9,436	4,181	73,884
Cardigan	1,363	112	1,251	691	30,079
Lampeter	1,604	95	1,509	414	28,337
Llandysul	1,356	89	1,267	414	29,096
New Quay	1,059	73	986	328	24,591
Totals	15,284	835	14,449	6,028	185,987

**Sitting Car Details, 1963**

	Total	Emergency	Non-Emergency
Number of patients conveyed	3,685	238	3,447
Number of journeys made ...	6,028	—	—
Mileage covered ...	146,158	—	—

## Section 9—PREVENTION OF ILLNESS, CARE AND AFTER-CARE

The local health authority's arrangements for the prevention of illness, care and after care are primarily related to tuberculosis, mental disorder and venereal disease but equipment for nursing at home and for the after care of patients is lent to persons suffering from a multitude of ailments.

### Tuberculosis

Close association is maintained with the three chest physicians serving the county. Mantoux testing of school children continued throughout the year and the number of children immunised with B.C.G. was 744.

Health visitors follow up contacts of tuberculosis patients and visit them in their homes following discharge. Where this is thought desirable, patients are sent to the Papworth Village Settlement.

## Section 10—HOME HELP SERVICE

The local authority provides home help on a very generous scale. An examination of the statistics shows, however, that about 88% of those receiving home help are of pensionable age. Were it not for the home help service, I have little doubt that even further calls would be made on the residential accommodation in the Council's Welfare Homes.

The Authority has one full-time organiser, one assistant organiser, one full time home help and 183 part-time home helps. The cases where home help was provided during 1963 are classified below :—

Maternity (including expectant mothers) ...	26
Tuberculosis ... ..	3
Chronic sick, including aged and infirm ...	257
Care of children ... ..	5
Blind ... ..	14
Total ... ..	<hr/> 305 <hr/>

Applications received during the year totalled 236. These were made up as follows :—

Blind	...	...	1
Tuberculosis	...	...	1
Care of children	...	...	8
Illness and old age	...	...	182
Maternity	...	...	44
Total	...	...	236

			Number provided with home help for first time during the year	Total number provided with home help during the year
Blind	...	...	1	14
Tuberculosis	...	...	1	3
Care of Children	...	...	2	5
Illness and old age	...	...	107	257
Maternity	...	...	26	26
Total	...	...	137	305

Visits paid to householders	...	...	...	924
Visits paid to home helps	...	...	...	548
Visits paid to Welfare Officers and District Nurses	...	...	...	51
Other visits	...	...	...	143

An analysis of the ages of persons receiving home help in the county gave the following results.

<i>Age</i>	<i>Percentage</i>
Over 100 years of age...	0.5
90—100 „ ...	6.9
80—89 „ ...	33.9
70—79 „ ...	37.0
60—69 „ ...	10.9
Under 60 ...	10.8

## Section 11—VENEREAL DISEASES

Dr. Vernon Williams, the consultant in venereal diseases, holds a weekly clinic at the Aberystwyth General Hospital. Contact is maintained with him and the health visitors assist in after-care when required.

The Cardiganshire cases dealt with for the first time during the year were as follows :

	Male	Female
Syphilis ... ..	3	4
Gonorrhoea ... ..	—	—
Other Conditions requiring treatment	11	3

## Section 12—HEALTH EDUCATION

The Council has decided to appoint a Health Education Officer who will co-ordinate the work carried out by health visitors. The appointment was expected to be ratified early in the year 1964.

The present health education methods include talks, and the use of films and posters. But in a scattered area, the work involved in organising an evening meeting when people are free is considerable. The lack of public transport and the counter-attraction of television make one think that many forms of propaganda are better organised on a national than on a local basis. This refers in particular to venereal disease and cancer of the lung.

## Section 13—NATIONAL ASSISTANCE ACT, 1948

The County Welfare Officer is responsible to the Welfare Committee for nearly all of the services carried out under the Act. Medical Officers of the Health Department, however, examine all applicants for entry into the Welfare Homes and also examine persons who are transferred from one Home to another. Routine visits to Homes in accordance with the Council's Proposals under Section 21 of the above Act are also made.

Since the introduction of the Handicapped Persons' Scheme, medical opinion on doubtful cases is obtained from the Health Department.

### Blind Welfare

There were 240 registered blind persons in the County at the end of the year. These were visited by the health visitors, by welfare officers and by the home teacher for the blind where tuition was considered practicable.

It will be seen from the following tables that the majority of blind people in Cardiganshire are over 70 years of age. The absence of industry and dangerous trades makes blindness following accidents an uncommon occurrence.

The following tables show the number of registered blind persons and the number of persons on the observation register at the end of the year.

**REGISTERED BLIND (Ordinarily resident in the county).**

<i>Age Group</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
0	—	—	—
1	—	—	—
2	—	—	—
3	—	—	—
4	—	—	—
5—10	—	1	1
11—15	—	2	2
16—20	—	1	1
21—19	—	—	—
30—39	3	5	8
40—49	5	4	9
50—59	4	7	11
60—64	8	11	19
65—69	11	14	25
70 and over	53	111	164
TOTAL ...	84	156	240



## ON OBSERVATION REGISTER (Ordinarily resident in the county)

<i>Age Group</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
0—1	—	—	—
2—4	—	—	—
5—15	—	2	2
16—20	4	—	4
21—49	2	5	7
50—64	5	13	18
65 and over	24	62	86
TOTAL	35	82	117

### Section 14—CARE OF CHILDREN

Routine medical examination of children at Peterwell Home and Cartrefle and Erw Lon Family Units were carried out by medical officers of the Department. Boarded out children were also examined in the manner prescribed by statute. Close contact is kept with the Children's Officer, on the one hand, and with practitioners providing the children with general medical services, on the other.

### Section 15—MISCELLANEOUS MEDICAL EXAMINATIONS

The Health Department carried out a large number of medical examinations during the year. These were undertaken for a variety of reasons. All new entrants to the superannuation scheme were examined as were all roadmen qualifying for admission to the Sick Pay Scheme. Entrants to Training Colleges were also examined and these numbered close upon a hundred. All Mid-Day Meals staff were submitted to examination. A number of examinations was carried out on behalf of other local authorities on a reciprocal basis.

All applicants for school transport on medical grounds, school absentees, handicapped pupils in various categories, and children applying for the deferment of the 11-plus examination on health grounds were all examined.

Persons applying for admission to Welfare Homes and numerous borderline chronic sick cases already in Homes were also examined. Boarded out children under the care of the authority as well as those in Family Units or Homes were regularly examined. A health report was prepared on all children appearing in Juvenile Courts. Medical examination of children being sent to approved or special schools was also undertaken.

Medical examination of firemen of the Joint Fire Brigade stationed in Cardiganshire was undertaken at the request of the Chief Fire Officer. Similarly medical examination of police officers of the Carmarthenshire and Cardiganshire Constabulary, if stationed in Cardiganshire, was carried out at the request of the Chief Constable.

### Section 16—CHIROPODY SERVICE

The Chiropody Service in Cardiganshire is run under the aegis of a Voluntary Committee which receives a grant from the County Council. As the chiropody service is primarily intended for the aged, the Welfare Department is responsible for its general management and the Health Department plays no part in the running of the scheme.

This voluntary committee deals only with pensioners (males over 65 and pensioned females over 60), and these people must be in receipt of National Assistance, in addition to their pension.

One thousand nine hundred and eighty four cases were treated during the year, and all of these were single treatments.

## Section 17

Report of Dr. J. R. Jones, Deputy County Medical Officer

### MENTAL HEALTH

During 1963, there was a slight increase over the previous year in the number of cases investigated and the number of patients admitted to hospital. However, the number of patients admitted compulsorily has remained virtually the same for three years and the majority of these are chronic relapsing cases who have no insight into their condition, but recover sufficiently with hospital therapy to live for varying periods within the community. Although these periodic admissions entail considerable work both by hospital and local authority staff, the procedure is preferred to long-stay in hospital with its danger of the patient becoming institutionalized and so losing complete contact with ordinary life.

Table C shows the number of cases investigated by Mental Welfare Officers and Table D shows an analysis of the method of admission to hospital. It will be seen that six persons, classified as subnormal, were admitted to hospital; this does not necessarily mean a life long stay in hospital, as intensive re-habilitation is now carried out with a view to integrating patients back into their usual environment with after-care provided by the Health Department.

Table E compares the admission rate to hospital with the previous two years. Table F shows the category of patients under the care of the local authority and from this, it can be deduced that the case load for each field worker is reasonable and ensures adequate care instead of hurried, useless visits.

The term "subnormal" has been criticized and the new terminology "mentally retarded" is gradually becoming more popular and it is hoped that this term will eventually be adopted officially. Domiciliary visits to such children were carried out during the year and the building of the Junior Training Centre has commenced. The parents of these children are grateful that new premises are being built and that no attempt has been made to utilize inferior or old buildings.

Statistics relating to school children are conveniently integrated into the report by the Educational Psychologist and, as such, are treated as part of the School Health Service. Case conferences are carried out regularly and, despite the difficulties mentioned in the 1962 report, consultant psychiatric opinion is sought when necessary.

**Table C**

Statistics of cases investigated by Mental Welfare Officers

<i>Cases referred by :</i>	<i>Aberystwyth District</i>		<i>Aberaeron District</i>		<i>Cardigan District</i>		<i>Total</i>
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	
General Practitioners	22	47	7	10	22	20	128
Police or Courts	7	4	—	—	1	—	12
Hospital (in-patient or out-patient)	23	12	—	5	4	6	50
Other Sources	24	27	1	—	—	2	54
Sub-Totals ...	76	90	8	15	27	28	244
TOTALS ...	166		23		55		244

**Table D**

Details of admissions undertaken by Local Authority Officers :

Number of patients admitted from County to St. David's Hospital	...	154
Number of patients admitted to hospitals for subnormal	... ..	6
		<hr/> 160 <hr/>

	<i>Aberystwyth</i>		<i>Aberaeron</i>		<i>Cardigan</i>		<i>Total</i>
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	
Informal ... ..	15	21	—	—	4	3	43
Section 29 ... ..	15	10	6	5	6	4	46
Section 25 ... ..	—	2	1	—	—	—	3
Section 26 ... ..	—	—	—	—	—	—	—
Sub-Totals ...	30	33	7	5	10	7	92
TOTALS	63		12		17		92
Transferred to S. 26 after admission	3		1		4		8

Table E

	1961	1962	1963
Total number of admissions to St. David's Hospital ... ..	170	132	154
Admissions undertaken by Local Authority ... ..	93 (54%)	61 (45%)	86 (56%)
Rate of admission per thousand population :			
Informal ... ..	2.2	1.7	2.0
Under Section ... ..	1.0	0.8	0.9
	—	—	—
	3.2	2.5	2.9
	—	—	—

Table F

Category of patients under care of Local Authority :

	<i>Mentally ill</i>	<i>Subnormal</i>	<i>Severely Subnormal</i>	<i>Total</i>
Resident in residential training centre (attached to hospital) ...	—	1	—	1
Receiving home training ...	—	11	4	15
Resident in L.A. Home ...	30	—	—	30
Resident at L.A. expense in other residential homes ... ..	1	1	—	2
Receiving home visits ...	135	36	10	181
Total number of patients under care ... ..	166	49	14	229

## Bryntirion Home, Tregaron

This mental health hostel is now firmly established and considerable interest is taken in the residents by the local inhabitants and is highly commendable and appreciated.

During the year, the number of residents that could be accommodated was increased to 29 and there is still a demand for further accommodation. Expansion to 36 beds is proposed for 1964 and is very necessary considering that the number of beds at St. David's Hospital is to be reduced gradually to approximately 500 and also that the length of stay in hospital is being shortened by improvements in treatment.

Thirteen residents were discharged to their independent lives during the year and much of this success is due to the care and attention given by the staff of the hostel. Since there were no applicants for resident Matron, Mrs. Worthington, one time Matron at Aberystwyth Hospital, agreed to act as Matron and the residents and staff have benefited greatly by her experience.

Table A shows the admissions and discharges during the year and Table B shows an analysis of these cases. Two cases in the age group 20—30 years were admitted purely as a temporary measure pending transfer to hospital.

**Table A**

<i>Number of residents on 1st January, 1963</i>	...	25
<i>Admissions from</i>		
Welfare Homes	... ..	1
St. David's Hospital	... ..	3
Other hospitals	... ..	5
Home (including 1 re-admission)	... ..	22—31
<i>Discharges to</i>		
Welfare Homes	... ..	3
St. David's Hospital	... ..	5
Other hospitals	... ..	1
Home or care of relatives	... ..	10
Died	... ..	6
Other mental hospitals	... ..	1—26
<i>Number of residents on 31st December, 1963</i>	...	30



Table B

Analysis of cases admitted, 1963 :—

<i>Diagnosis</i>	<i>Age Groups</i>						<i>Total</i>
	20—30	30—40	40—50	50—60	60—70	<i>Over</i> 70	
Senile Confusional State ...	—	—	—	—	3	9	12
Depression ...	—	—	—	—	2	5	7
Malnutrition ...	—	—	—	—	—	1	1
Organic Dementia ...	—	—	—	—	—	3	3
Paranoia ...	—	—	—	1	—	—	1
Manic Depressive	—	—	1	1	—	—	2
Others ...	2	—	1	—	1	—	4
Total Admissions (excluding re-admissions)	2	—	2	2	6	18	30

## Section 18

## DIABETIC DETECTION SURVEY

A full report of this survey has been presented to the Council and the results are published here only as a follow-up to the annual report of 1962.

1. Estimated population over 40 years of age	...	...	...	26,101
2. No. offered test	...	...	...	17,727
3. No. refused test	...	...	...	688
4. No. tested	...	...	...	17,039
5. No. referred to general praitioner	...	...	...	153
6. No. of cases in which results were returned by G.P.	...	...	...	124
7. No. of new cases of diabetes (amongst No. 6)	...	...	...	99
8. Estimated total of new cases of diabetes if all results were known	...	...	...	122

JOSEPH R. JONES,  
*Deputy County Medical Officer*

## Section 19

Report of Mr. Evan Richards, County Public Health Inspector, on

### SANITARY CIRCUMSTANCES

#### Milk (Special Designations) Regulations, 1960

The duties of the County Council under these Regulations are :—

- (i) Licensing of milk pasteurising establishments.
- (ii) Licensing of dairies where milk is bottled except those dairies where milk is sold retail direct from the farms.
- (iii) Licensing all other premises where pre-packed bottled milk is sold.

For pasteurisation of milk there are three licensed premises within the County, namely the Milk Marketing Board's Creamery at Felinfaeh, Nantllan Dairy, Clarach, and Highmead Dairy, Llanybyther. Out of 76 samples taken from these dairies one sample failed to satisfy the phosphatase test as to adequacy of pasteurisation ; on a further investigation being made at the dairy concerned this was found to be due to a mechanical fault in the plant and was immediately rectified.

Routine visits were also made to the other licensed premises for the purpose of checking on the handling, bottling and storage of milk as required by the Regulations.

The number of licences in force at the end of the year were as follows :—

(1) No. of dairies where milk is bottled	...	...	...	8
(2) No. of premises licensed for the sale of pre-packed bottled milk				33

#### Diseases of Animals

Under Section 31 of the Food and Drugs Act, 1955, the County Council is responsible for seeing that no person sells milk from any cow suffering from tuberculosis, infections of the udder, anthrax or foot-and-mouth disease in order to prevent the spread of such diseases to humans. For the carrying out of this duty there is close liaison with the Animal Health Division of the Ministry of Agriculture, Fisheries and Food, whose Veterinary Officers inform the Department of possible sources of infection discovered at routine clinical examination of dairy herds.

There was one case of Anthrax in a cow at a farm near Devil's Bridge. Action was taken under the provision of the Anthrax Order to dispose of the carcase by burning. There was another suspected case at a milk farm near Cardigan but on investigation this proved negative.

## Infectious Disease

The table on page 12 shows the incidence of infectious diseases notified during the year. From this it will be seen that the County continued to be free of any major infectious diseases. There were no deaths attributable to any of these diseases.

## Tuberculosis

During the year 30 new cases of tuberculosis were notified, 24 being tuberculosis of the lung and 6 non-pulmonary. Details of area, sex and age distribution of the cases are given in the table on page 13.

Each new case is investigated by a health visitor as to the environmental conditions at the home in order to prevent the spread of infection, and where any adverse conditions are found the matter is taken up with the local sanitary authority through the District Medical Officer of Health. Similar action is taken when a patient is discharged from a chest hospital.

The figures of new cases of tuberculosis notified during the last twelve years are as follows :—

<i>Year</i>	<i>New Cases</i>		<i>No. of Deaths</i>	
	<i>Pulmonary</i>	<i>Non-Pulmonary</i>	<i>Pulmonary</i>	<i>Non-Pulmonary</i>
1952	36	7	12	3
1953	47	2	14	1
1954	44	7	5	2
1955	37	5	4	1
1956	43	8	9	2
1957	35	8	6	1
1958	29	3	2	Nil
1959	30	8	5	Nil
1960	25	6	8	2
1961	33	5	8	Nil
1962	18	7	1	1
1963	23	5	5	—

## Housing

Under Section 116 of the Housing Act, 1957, it is the duty of the County Council to have constant regard to housing conditions in each rural district within its area with particular reference to overcrowding and other unsatisfactory housing conditions. It has also to see that sufficient steps are being taken by the district authorities to remedy these conditions and to provide additional housing conditions.

## New Housing

The following table shows the number of new dwellings erected by the various authorities during the year and also since the end of the last war :—

### NEW HOUSES BUILT FROM 1945 TO 31.12.63.

	<i>Local Authority Houses</i>		<i>Privately Built Houses</i>	
	<i>Permanent</i>		<i>New Dwellings</i>	
	<i>No. under construction at 31/12/63</i>	<i>No. completed</i>	<i>Under construction at 31/12/63</i>	<i>No. completed</i>
Aberystwyth Borough	—	396	19	100
Cardigan Borough ...	20	243	27	101
Lampeter Borough ...	—	105	1	20
Aberaeron Urban ...	—	43	5	30
New Quay Urban ...	6	28	—	16
Aberaeron Rural ...	28	242	14	93
Aberystwyth Rural ...	—	346	103	287
Teifside Rural ...	34	297	58	162
Tregaron Rural ...	—	106	7	47
Whole County ...	88	1,806	234	856

In addition to the figures given above tenders had been accepted at the end of the year for the building of 40 houses by the Cardigan Borough Council, 16 houses by the Aberaeron Urban District Council, 26 houses by the Aberaeron Rural District Council and 4 houses by the Teifside Rural District Council.

## Slum Clearance

There are no slum areas of houses within the County which call for action to clear them as clearance areas but there are still many individual unfit properties scattered throughout the area. Action is taken in demolishing them or serving closing orders on their owners when the present occupiers can be rehoused. The following table shows what action was taken by the four Rural District Councils during the year.

<i>Name of Authority</i>	<i>Estimated No. of unfit houses</i>	<i>No. closed or demolished in 1963</i>	<i>Total No. closed or demolished since 1955</i>
Aberaeron R.D.C. ...	200	9	114
Aberystwyth R.D.C. ...	86	9	34
Teifside R.D.C. ...	366	—	14
Tregaron R.D.C. ...	213	4	29

## Housing Improvement Grants

The improvement of rural housing standards has again continued to be one of the main interests of the four Rural District Councils and they have been very active in this field. Apart from the Standard Grants of £155 per property for providing bathrooms and hot water supply all the authorities have encouraged applicants wherever possible to apply for the Discretionary Grant of £400 in order to bring the whole of the house up to modern standards. The following table shows the number of grants approved during the year.

<i>Name of Authority</i>	<i>Number of discretionary grants approved</i>	<i>Number of standard grants approved</i>
Aberaeron R.D.C. ...	26	24
Aberystwyth R.D.C. ...	53	11
Teifside R.D.C. ...	30	36
Tregaron R.D.C. ...	16	12



## Rural Water Supplies and Sewerage Acts, 1944—61.

Where a local sanitary authority or a water board propose to provide a mains water supply or sewage disposal scheme Exchequer grants are payable by the Government towards the cost of such schemes under the provisions of the Rural Water Supplies and Sewerage Acts 1944—1961. Where an Exchequer grant is payable the County Council is also required to make a contribution towards the cost of the work.

Circular 15/61 laid down a definite formula for assessing grants under the Act, and this started a new policy of only paying grants towards the cost of water mains or sewers, the cost of the headworks or sewage disposal works being ignored for the purposes of assessing grant. The intention of such a policy is to encourage the formulation of larger schemes to cater for groups of parishes or villages rather than a multiplicity of smaller schemes to cater for individual villages or hamlets. From a public health point of view this policy has much to commend it as it encourages the preparation of larger schemes where, for example, water will be treated at the source before distribution whereas such treatment would not be practicable for a very small water scheme. Again one large sewage disposal works is likely to receive better maintenance than a number of smaller ones. Such a policy is also favourable to the rural districts as, in the past, it was the high cost of mains to serve scattered properties that was making the schemes so costly but now with Exchequer assistance being made available towards the cost of such mains it greatly reduces the financial commitments of authorities embarking on such schemes.

Only one application for grant under these Acts was submitted to the County Council during the year. This was by the Aberaeron R.D.C. towards the cost of providing a joint sewerage scheme to serve the villages of Felinfach and Ystrad at an estimated cost of £37,315.

Although only one new application was received much progress was achieved in implementing other schemes that had been approved in previous years :—

- (i) The Henllan sewerage scheme was completed by the Teifside R.D.C.
- (ii) Work was commenced on the Tresaith sewerage scheme by the Teifside R.D.C.
- (iii) A tender was accepted and work commenced on the Llechryd sewerage scheme by the Teifside R.D.C.
- (iv) A tender was accepted by the Teifside R.D.C. for the Aberporth sewerage scheme.
- (v) The Llangybi sewerage scheme was completed by the Aberaeron R.D.C.
- (vi) The Aberarth sewerage scheme was completed by the Aberaeron R.D.C.
- (vii) The Talsarn sewerage scheme was completed by the Aberaeron R.D.C.
- (viii) The Gilfachrheda sewerage scheme was completed by the Aberaeron R.D.C.
- (ix) Work commenced on the Cribyn sewerage scheme by the Aberaeron R.D.C.
- (x) Work commenced on the Llwyncelyn sewerage scheme by the Aberaeron R.D.C.
- (xi) Work commenced on the Llanddewi Brefi sewerage scheme by the Tregaron R.D.C.



## General

During the last twelve years a considerable amount of work has been carried out in improving living conditions by building new houses to replace unfit houses, improving the sanitary facilities in other houses and providing a piped water supply and sewage disposal. Substantial progress has been made in that time by all the sanitary authorities in these fields, and particularly so by the four Rural District Councils. In order to illustrate the extent of this progress the following tables have been prepared from information obtained from the Registrar General's Census Report for 1951 and 1961. The 1961 figures were published in 1963 and are the latest reliable figures available. These figures show that more progress was made in this field during that decade than in the whole period up to 1950 and it must be borne in mind that further progress has again been made since the last census was taken.

Households with exclusive use of the following services ...	1951			1961		
	<i>County</i>	<i>Urban Districts</i>	<i>Rural Districts</i>	<i>County</i>	<i>Urban Districts</i>	<i>Rural Districts</i>
Total No. of Households	16,736	5,350	11,386	16,946	5,474	11,472
Piped Water supply...	8,385	4,199	4,186	13,705	5,326	8,379
Hot Water Supply ...	Figures	not	available	10,994	4,606	6,388
Fixed Bath ...	5,422	3,020	2,402	9,884	4,424	5,460
Water Closet ...	7,399	4,386	3,013	11,216	5,228	5,988

An analysis of these figures as they relate to the whole county shows the following improvements in the proportion of households where the sanitary facilities have been improved :—

### Water Supply

80% of households had piped water from a tap within their houses compared with 50% in 1951.

### Bathrooms

58% of households had fixed baths compared with 32% in 1951.

### Water Closets

66% of households had water closets compared with 44% in 1951.

It is of course in the rural districts that the majority of the improvements have been carried out as it was in those areas where mains water supply became available for the first time during the decade under review as a result of the great progress made by the Rural District Councils and later by the South Cardiganshire Water Board in providing piped water to villages and hamlets.

The following table shows the position in the four rural districts in 1951 and in 1961 and it also shows the great amount of work still remaining to be done in this field before the ideal of every house being equipped with modern conveniences is achieved.

<i>Rural District (with number of house- holds in brackets)</i>	<i>No. with piped water supply</i>		<i>No. with fixed bath</i>		<i>No. with water closet</i>	
	1951	1961	1951	1961	1951	1961
Aberaeron Rural (2,951)	819	2,048	430	1,190	479	1,251
Aberystwyth Rural (3,598) ... ..	1,554	2,704	921	1,872	1,114	2,040
Teifside Rural (3,353)	1,370	2,690	830	1,841	1,087	2,050
Tregaron Rural (1,570)	443	937	223	557	333	651

EVAN RICHARDS,  
*County Public Health Inspector*

CARDIGANSHIRE EDUCATION COMMITTEE

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ANNUAL REPORT

of the

PRINCIPAL SCHOOL MEDICAL OFFICER

for the year

1963



## To the Chairman and Members of the Education Committee

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I have pleasure in presenting the Annual Report of the School Health Service for the year which ended on 31st December, 1963.

The examination of schoolchildren on the revised basis undertaken during 1962 continued to work satisfactorily in 1963. In addition to the routine examinations, children requiring transport to school on medical grounds, those seeking postponement of the eleven plus examination for a similar reason, were also examined. All those employed in school canteens were subjected to special scrutiny to exclude the possibility of their being carriers of typhoid or of allied diseases. Teachers appointed to the staff of the local education authority and young persons from Cardiganshire who apply for admission to training colleges were also examined.

The dental section is fortunate in being fully staffed and the increase in establishment has allowed a greater degree of conservative treatment to be carried out in the older children at a time when the number of dentists in contract with the Executive Council is dwindling markedly in the county in general and in the north in particular.

A child guidance service is no nearer realisation than a year ago. The responsibility for this state of affairs does not rest on the shoulders of the local education authority. Repeated representations to the Welsh Hospital Board, followed by approaches to the Welsh Board of Health and to the Joint Parliamentary Secretary of the Ministry of Health in person, have not yet produced a consultant child psychiatrist in Cardiganshire. It is hoped however that the increases in establishment recommended by the Welsh Hospital Board will be approved by the Minister and that in the not too distant future, a rudimentary child guidance service will be set up in the county. By the time the Minister is likely to approve of new consultant appointments, a new purpose-built clinic on the most modern lines will be available for occupation in Aberystwyth.

A more detailed account of the work of the Department will be found in the ensuing pages. The section on Dental Health has been prepared by Mr. W. D. Percival Evans, the Principal Dental Officer, and that on the School Psychological Service by Dr. Cyril James. Mr. Evan Richards, the County Public Health Inspector reports on matters falling within his particular sphere of duty.

I. MORGAN WATKIN,

*Principal School Medical Officer.*

REPORT OF MR. W. D. PERCIVAL EVANS,  
PRINCIPAL DENTAL OFFICER

The number of children between the ages of 4 and 15 attending school in England and Wales is approximately nine million. This is the period in their life when the teeth are particularly susceptible to decay and we find that of this number six million suffer from decayed teeth to some extent or other.

Up to the present time, the problem has been tackled by what may be described as the normal conventional methods, viz.,

- (1) Dental Health Education and Propaganda regarding diet and proper care of the mouth and teeth.
- (2) Restoration of the teeth by fillings.
- (3) Orthodontic treatment and correction of the irregularities of the teeth, and finally by extraction of the teeth when they have gone beyond repair and are unsaveable.

In view of the present shortage of manpower in the dental profession, and especially in the School Dental Service, it is obvious that the effort to deal successfully with dental disease cannot produce satisfactory results. It may be, then, that the time has come for those interested in Dental Health to take a new look at the problem.

In previous reports it has been stressed that the nutrition and eating habits of children are of paramount importance. The bad effects of sweet, sticky carbohydrate foods and drink upon the teeth have been pointed out. The Education and Health Committee have co-operated in all the efforts to curtail the habit in all the schools of the county.

Yet it is difficult to believe that we can ensure that the greater proportion of our children can be persuaded to give up sugars, sweets and carbohydrate food which they seem to enjoy so much, especially when manufacturers of these products spend very large sums annually on advertising their goods both in the press and on television.

No doubt we can be more successful in persuading the child population to clean their teeth because fortunately the toothpaste manufacturers again with their press and television advertising (if only for their own reasons) are on our side. Good as this may be, unfortunately, diligent cleaning of the teeth in the absence of control of what we eat is not enough to ensure sound teeth. Also the claims of manufacturers of special toothpastes containing substances which are designed to prevent teeth decaying have been very disappointing. The exception perhaps are those which contain fluoride—they certainly tend to show more promise. Even so it is difficult to believe that these will make a significant reduction on the national pattern of dental disease.

It would appear then that this leads us to the conclusion that the sole effective measure for our children at present is the introduction of fluoride to our water supplies. There is no doubt that when fluoridation is applied on a national scale it will be of the greatest value. Unfortunately, this may take years to accomplish due to the criticism and opposition (ironically largely from the middle-aged) which may continue for the next few years.



On the other hand it may be that it will be followed by a complete reversal of public opinion. Indeed it is hoped that parents will demand that their water supplies are such that they will contain the necessary minerals for the proper calcification of their children's teeth.

Nature has shown what happens when fluoride is present naturally in the water supply. Dental disease is halved.

The Minister of Health and his expert Medical and Dental Advisory Committees have strongly advised the general adoption of adding fluoride to our water supplies and they are satisfied that no harmful effects will result.

For the majority of our children it is true to say that if it is not added to the water supply they will not get it at all.

It is a matter of great urgency that the co-operation of all people interested in Dental Health and especially the members of our Local Authorities be sought to ensure that the scheme be adopted so that the population be free from dental disease.

W. D. PERCIVAL EVANS,

*Principal School Dental Officer*

## REPORT OF MR. EVAN RICHARDS, COUNTY PUBLIC HEALTH INSPECTOR

### Milk-in-Schools Scheme

Despite transport difficulties to some of the more isolated small rural schools every school in the county continued to receive daily supplies of milk throughout the year. The larger schools and some of the smaller schools are supplied under a three year contract from 1962 to 1965 but other schools for which no tenders were received are supplied by local farms at the request of the Education Committee and during the year there were several changes amongst such producers. As has been pointed out in previous reports it is becoming increasingly more difficult to obtain a supply for some of the more isolated schools and then the Committee is obliged to accept a bulk supply in a container from some neighbouring farmer who is willing to supply the school.

All contracts under this scheme are subject to the approval of the Principal School Medical Officer in accordance with the Provisions of Milk and Meals Regulations, 1945, and all premises and sources of supply are inspected before a new contract or a change of supplier is accepted.

The following figures show the grades of milk supplied to the schools :—

Pasteurised milk in one third pint bottles	...	...	28
T.T. milk in one third pint bottles	...	...	58
T.T. milk in containers other than bottles	...	...	16

The fact that there are no large centres of population within the county means that there are very few pasteurising plants available as such plants, on account of their heavy capital cost, can only be operated where there is a large demand for bottled milk and as such it is impossible to obtain a supply of pasteurised milk for all the schools. Even out of the three pasteurising plants operating within the county only one supplies milk to school. In the Cardigan district pasteurised bottled milk for schools is obtained from a dairy near Swansea.

During the year 264 visits were paid to various dairies, farms and schools in connection with this work. Routine samples for bacteriological examination are referred to the Public Health Laboratory at Aberystwyth and samples for biological examination are submitted to the Public Health Laboratories at Carmarthen or Swansea. None of the samples submitted showed any evidence of infection with Tuberculosis or Br. abortus. There were some instances of failure to satisfy the prescribed tests for keeping quality and these were taken up with the producers concerned.

### **School Water Supplies and School Sanitation**

During the year a mains water supply from the Teifi Pools Scheme became available in the Gartheli, Penuwch and Bwlchyllan districts and the schools at these villages have now been connected to the mains. At Gartheli the Education Committee had provided a small gravitation scheme from a source behind the school and at Penuwch and Bwlchyllan supplies were obtained from small wells within the school grounds and were liable to surface contamination despite the fact that the Education Committee had taken all practicable steps to avoid such a possibility.

Out of 99 schools in the county 94 are now supplied direct from public water mains with water that has been chlorinated at the source. Of the remaining five three are dependent on private gravitation schemes constructed by the Education Committee some years ago and can be considered satisfactory as regards yield and quality. Two schools, namely Brynherbert C.P. and Cofadail C.P., are still dependent on wells within the school playgrounds—the water is pumped electrically into the schools for distribution to the kitchen, wash basin and toilets and all practicable steps have been taken to protect the wells from surface contamination. Routine visits are paid to these private sources in order to check on the bacteriological purity of the water and to make visual checks on potential causes of contamination.

Water-borne sanitary conveniences were installed during the year at Llanfihangel-y-Creuddyn C.P. School and also at Capel Seion C.P. School to replace the old Elsan lavatories at the schools. The latter school, which was privately owned, has only recently been taken over by the Education Committee and has now been modernised throughout.

Ninety-five schools are now provided with modern water-borne sanitary conveniences. Only four schools, namely Goginan C.P., Penllwyn C.P., Blaenporth V.P. and Castell Flemish C.P. School, are still dependent on Elsan lavatories, the first three of these are scheduled for closure as new schools are proposed for these districts, and at Castell Flemish it is proposed to modernise the school offices during 1964 as there is now an adequate water supply available.

### **Inspection of School Kitchens and Canteens**

During the year 354 visits were made to the various school kitchens and canteens to check on the quality of the foodstuffs supplied and also to check on the provisions of the Food Hygiene Regulations, 1960, as far as they apply to such establishments. The general standard of hygiene maintained at the kitchens continues to be excellent and it is once again a pleasure to report that not a single case of food poisoning was reported as having been due to any food consumed at school premises.

The kitchen-dining room at Capel Seion C.P. School was modernised during the year when the school was re-modelled and is now up to the required standard. Previously an old classroom served as the kitchen and its general condition left much to be desired but the Committee were powerless to do any major improvements until the school buildings were handed over to them. The new kitchens at Penyparc C.P. School, Myfenydd C.P. School and Llanwnnen C.P. school came into use during the year after the extensive improvements that were carried out at these schools during the previous year.

Additional wash basins with hot water were supplied to several of the smaller kitchens in order to comply with the Regulations requiring separate facilities for hand-washing for cooks and canteen staff and stainless-steel sterilising sinks were provided at other kitchens for the efficient washing of utensils. The practice of providing laminated plastic working tops for tables and other working surfaces at kitchens and dining halls has continued wherever repairs or replacements of such articles were required. The provision of these facilities are essential for maintaining the hygienic condition of the food because apart from cutting down on the risks of accidental contamination they serve to develop the staff's pride in the cleanliness of their kitchens and it is really this in itself which is the basic factor in maintaining kitchen hygiene at a high level.

EVAN RICHARDS,  
*County Public Medical Inspector.*

## SCHOOL PSYCHOLOGICAL SERVICE

### Report of Dr. Cyril James, Consultant Psychologist

The School Psychological Service in Cardiganshire, as in previous years, has continued to function along lines which have since become familiar in the pamphlet issued by the British Psychological Society (September 1962). Such a service organised according to Ministry of Education Circulars 347 and 11/61 is working in close association with the School Health Service and the teaching staff of the schools. The Psychologist also works as a member of the Child Guidance Team in co-operation with the Consultant Child Psychiatrist and Social Workers.

The advisory and clinical work together forms a psychological service to schools which aims at contributing to the healthy development of children through the application of psychological knowledge to education and mental health—including the development and operation of facilities for ordinary as well as handicapped pupils.

Details of children clinically examined by the Educational Psychologist during 1963 and recommended for various forms of Special Educational Treatment are given as follows.

TABLE I—PSYCHOLOGICAL CLINICAL EXAMINATIONS

	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
(i) Educationally			
(a) Retarded	6	1	7
(b) Backward	8	1	9
(c) Dull	7	5	12
Total	21	7	28
(ii) Subnormal (unsuitable for education at school)	1	0	1
(iii) Maladjusted (wholly)	4	0	4
(iv) For Educational Guidance	0	0	0
Grand Total	26	7	33

Of the educational subnormal children examined during the year 1963 another group of 7 boys and 1 girl were referred for psychiatric opinion in addition to the four (4) boys who were wholly maladjusted.



The following children were recommended for various types of treatment.

TABLE II—SPECIAL EDUCATIONAL TREATMENT

	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
(1) Residential Special School ...	6	5	11
(2) Ordinary School : Remedial Unit	9	1	10
(3) Ordinary School : Observation ...	8	0	8
(4) Junior Training Centre ...	1	0	1
(5) Audiometric Examination ...	1	1	2
(6) Speech Therapy ...	1	1	2
(7) Psychiatric Referral ...	10	0	10
(8) Paediatric Referral ...	9	1	10
(9) Remedial Teaching ...	16	1	17
(10) Vocational Guidance ...	—	—	—
(11) Educational Guidance ...	1	0	1
(12) *Hospital Special Units ...	1	1	2

\*—One to Taplow Hospital (Arthritis) ;  
one to Belmont Hospital (Minski Unit)—(Maladjusted/Speech Disorders)

In addition to the above children examined by the Psychologist during 1963 action was taken in respect of the special educational treatment of others examined in previous years.

The urgent need to establish a Remedial Teaching Unit for the treatment of mal-adjusted and particularly educationally retarded children of high intelligence whose attainment for various reasons is not commensurate with their apparent academic aptitude, has now been recognized. Arrangements are now in hand for the appointment of a Remedial Teacher and the establishment of such a unit in Penparcau County Primary School in 1964.

During the year, the work of screening children for Highmead Residential Special School for E.S.N. pupils continued and the school again had a full complement of pupils. A waiting list developed in the three counties although the Ministry of Education has now agreed to extend the school by forty places as well as to supply extra facilities for physical training, pottery and craftwork.

Alternative local arrangements for special educational treatment have continued to improve and excellent work is being done in the remedial units established in the secondary schools.

As in previous years a survey was made of those children provisionally deemed by the headteachers to require special educational treatment. The statistics are as follows :

**Table III**  
**SURVEY OF PUPILS DEEMED PROVISIONALLY TO REQUIRE S.E.T.**

	<i>8+ Age Groups</i>			<i>All Age Groups</i>		
	<i>Boys</i>	<i>Girls</i>	<i>Total</i>	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
Subnormal ... ..	1	—	1	10	7	17
Dull ... ..	3	4	7	25	12	37
Backward ... ..	10	6	16	74	32	106
Retarded ... ..	5	1	6	25	11	36
Maladjusted ... ..	—	—	—	7	2	9
<b>Total ... ..</b>	<b>19</b>	<b>11</b>	<b>30</b>	<b>141</b>	<b>64</b>	<b>205</b>

The following statistics relate to children admitted to and discharged from Highmead Residential Special School during 1963.

**Table IV**  
**S.E.T. AT HIGHMEAD RESIDENTIAL SPECIAL SCHOOL FOR E.S.N. PUPILS**

	<i>Admissions 1963</i>			<i>Discharges 1963</i>			<i>Resident 1.1.64</i>		
	<i>Boys</i>	<i>Girls</i>	<i>Total</i>	<i>Boys</i>	<i>Girls</i>	<i>Total</i>	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
Cardiganshire	3	0	3	1	4	5	7	2	9+3
Pembrokeshire	6	4	10	6	1	7	11	13	24
Carmarthenshire	5	4	9	4	2	6	27	18	45
<b>Total</b>	<b>14</b>	<b>8</b>	<b>22</b>	<b>11</b>	<b>7</b>	<b>18</b>	<b>45</b>	<b>33</b>	<b>78+3</b>

This includes three Cardiganshire children attending as day pupils resident in a Local Authority Hostel. Two children attending the school are extra district pupils (viz. Glamorganshire).

The excellent reputation of the School has been maintained and pupils have made relatively satisfactory progress when account is taken of the nature of their specific disabilities. The extension of facilities for art, craft, domestic science and particularly animal husbandry with its oblique value for fostering the growth of arithmetical concepts has had a salutary effect on the general education of pupils. Since many of the children admitted to Highmead R.S.S. have been given priority on grounds of sociological difficulties as well as educational subnormality, it is gratifying to note that both the scholastic and domestic staff have combined to give the children a secure educational and social background.



During the year many outside bodies took an interest in the children. The School received a satisfactory report from the Minister of Education as a result of the full inspection.

Through the joint consultation of the Medical Officers of Cardiganshire and Carmarthenshire the services of a trained Speech Therapist continued to be made available to the school. Likewise through the co-operation of the Directors of Education of the three authorities concerned the respective Youth Employment Officers have arranged for the school leavers to receive Vocational Guidance. The provision of after-care to pupils who have left school presents a serious problem.

It is of interest to note that the progress of children is under constant and systematic review by the Psychologist in consultation with the headteacher whilst the medical arrangements are equally thorough.

Throughout the three counties all age groups are systematically surveyed by means of a Handicapped Pupils Return and with the passage of time and the increased availability of sessions given by the School Medical Officers, it should be possible in the near future to complete the individual ascertainment of all referrals made from the school population.

Arrangements have been made for the following handicapped pupils to receive Special Educational Treatment at Residential Special Schools.

**Table V—S.E.T. AT RESIDENTIAL SPECIAL SCHOOLS**

	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
Blind ... ..	0	1	1
Partially Blind ... ..	1	2	3
Deaf ... ..	1	1	2
Impaired Hearing ... ..	1	0	1
Delicate ... ..	0	1	1
Physically Handicapped (Misc.) ... ..	4	2	6
Maladjusted ... ..	4	1	5
Epileptic... ..	—	—	—

Further consultations have taken place with reference to the urgent need for the establishment of a day cum residential diagnostic unit at Carmarthen for handicapped pupils who present special problems of placement and treatment. Agreement has been reached in principle and a site is being sought in Carmarthen where advantages accrue from its central position and proximity to various ancillary facilities.

By dovetailing school records, including the results of the eleven plus allocation assessments with clinical records, it has been possible through the School Psychological Service to facilitate the provision of a variety of types of education for different categories of pupils in such a way that all children ranging from the quick to the slow

and the physically handicapped have an equal opportunity of profiting from an education suited to the particular stage of their development—physically, mentally and socially. In respect of the latter the co-operation of the Mental Health section of the Health Department has been greatly appreciated particularly the work of the health visitors and social workers.

In brief there has been a close liaison between the School Psychological Service and the School Health Service as well as with the schools themselves whilst both the statutory services of the Local Authority and the Regional Hospital Board have played their part in fostering the educational progress and mental health of the children, the fit and the handicapped, through an integrated and comprehensive approach to their problems.

CYRIL B. E. JAMES,

*Consultant Educational Psychologist.*

**Part I—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED  
AND ASSISTED PRIMARY AND SECONDARY SCHOOLS  
(INCLUDING NURSERY AND SPECIAL SCHOOLS)**

**Table A—PERIODIC MEDICAL INSPECTIONS**

Number of Pupils on Registers of Maintained Primary and Secondary  
Schools in January, 1964 ... 8,748

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		SATISFACTORY		UNSATISFACTORY	
		No.	% of Col. 2	No.	% of Col. 2
(1)	(2)	(3)	(4)	(5)	(6)
1959 and later	10	10	100%	—	—
1958	377	375	99.47%	2	0.53%
1957	367	365	99.46%	2	0.54%
1956	68	66	97.06%	2	2.94%
1955	32	30	93.75%	2	6.25%
1954	3	2	66.66%	1	33.33%
1953	4	4	100%	—	—
1952	509	506	99.41%	3	0.59%
1951	244	244	100%	—	—
1950	74	73	98.65%	1	1.35%
1949	579	578	99.83%	1	0.17%
1948 and earlier	488	488	100%	—	—
Total	2,755	2,741	99.49%	14	0.51%

**Table B—PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC  
MEDICAL INSPECTIONS  
(excluding Dental Diseases and Infestation with Vermin)**

Age Groups Inspected (By year of birth)	For defective vision (excluding squint)	For any of the other conditions recorded in Part II	Total individual pupils
(1)	(2)	(3)	(4)
1959 and later	—	1	1
1958	22	142	154
1957	24	133	151
1956	3	30	33
1955	6	19	23
1954	—	2	2
1953	—	3	3
1952	47	180	205
1951	31	89	103
1950	10	19	24
1949	73	142	185
1948 and earlier	71	106	147
Total	287	866	1,031

**Table C—OTHER INSPECTIONS**

**Notes :—**A special inspection is one that is carried out at the special request of a parent, doctor, nurse, teacher or other person.

A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

Number of Special Inspections ...	...	...	21
Number of Re-inspections ...	...	...	317
		Total ...	338

**Table D—INFESTATION WITH VERMIN**

**Notes :—**All cases of infestation, however slight, are included in Table D. The numbers recorded at (b), (c) and (d) relate to individual pupils, and not to instances of infestation.

(a) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons ...	...	...	40,574
(b) Total number of individual pupils found to be infested ...	...	...	196
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944) ...	...	...	Nil
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944) ...	...	...	Nil

# Part II—DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

Table A—PERIODIC INSPECTIONS

Note :—All defects, including defects of pupils at Nursery and Special Schools, noted at periodic medical inspections are included in this Table, whether or not they are under treatment or observation at the time of the inspection. This Table includes separately the number of pupils found to require treatment (T) and the number of pupils found to require observation (O).

Defect Code No.	Defect or Disease				PERIODIC INSPECTIONS			
					Entrants	Leavers	Others	Total
4	Skin ... ..	T			1	5	1	7
		O			14	22	14	50
5	Eyes— <i>a.</i> Vision ... ..	T			41	86	60	187
		O			10	59	27	96
	<i>b.</i> Squint ... ..	T			5	1	1	7
		O			7	1	1	9
	<i>c.</i> Other ... ..	T			—	4	—	4
		O			4	4	3	11
6	Ears— <i>a.</i> Hearing ... ..	T			2	—	1	3
		O			8	4	4	16
	<i>b.</i> Otitis Media ... ..	T			1	1	—	2
		O			12	6	7	25
	<i>c.</i> Other ... ..	T			—	—	—	—
		O			2	1	2	5
7	Nose and Throat ... ..	T			18	3	4	25
		O			118	41	59	218
8	Speech ... ..	T			6	4	2	12
		O			8	2	3	13
9	Lymphatic Glands ... ..	T			4	1	—	5
		O			61	28	25	114
10	Heart ... ..	T			1	1	—	2
		O			30	19	14	63

Defect Codo No.	Defect or Disease				PERIODIC INSPECTIONS				
					Entrants	Leavers	Others	Total	
11	Lungs	...	...	...	T	3	5	2	10
					O	18	16	16	50
12	Developmental— <i>a.</i> Hornia	...	...	...	T	—	—	1	1
					O	5	—	1	6
	<i>b.</i> Other	...	...	...	T	5	1	1	7
					O	1	13	10	24
13	Orthopaedic— <i>a.</i> Posture	...	...	...	T	2	21	5	28
					O	8	18	30	56
	<i>b.</i> Feet ...	...	...	...	T	26	12	24	62
					O	51	20	39	110
	<i>c.</i> Other...	...	...	...	T	6	18	4	28
					O	18	15	16	49
14	Nervous System— <i>a.</i> Epilepsy	...	...	...	T	2	—	—	2
					O	—	4	1	5
	<i>b.</i> Other	...	...	...	T	—	—	1	1
					O	—	1	3	4
15	Psychological— <i>a.</i> Development	...	...	...	T	—	—	1	1
					O	7	4	7	18
	<i>b.</i> Stability	...	...	...	T	1	—	1	2
					O	3	1	2	6
16	Abdomen	...	...	...	T	2	—	—	2
					O	12	—	4	16
17	Other	...	...	...	T	2	2	—	4
					O	17	8	9	34



Table B—SPECIAL INSPECTIONS

Note :—All defects, including defects of pupils at Nursery and Special Schools, noted at special medical inspections are included in this Table, whether or not they were under treatment or observation at the time of the inspection.

Defect Code No.	Defect or Disease	Special Inspections	
		Pupils Requiring Treatment	Pupils Requiring Observation
(1)	(2)	(3)	(4)
4	Skin	2	1
5	Eyes :		
	(a) Vision	2	1
	(b) Squint	—	1
	(c) Other	—	—
6	Ears :		
	(a) Hearing	2	1
	(b) Otitis Media	—	—
	(c) Other	—	—
7	Nose and Throat	1	1
8	Speech	—	1
9	Lymphatic Glands	—	—
10	Heart	—	—
11	Lungs	—	—
12	Developmental		
	(a) Hernia	—	—
	(b) Other	—	—
13	Orthopaedic :		
	(a) Posture	1	1
	(b) Fect	1	1
	(c) Other	—	—
14	Nervous system :		
	(a) Epilepsy	—	—
	(b) Other	—	—
15	Psychological :		
	(a) Development	2	—
	(b) Stability	—	—
16	Abdomen	—	—
17	Other	1	1

**Part III—TREATMENT OF PUPILS ATTENDING MAINTAINED AND  
ASSISTED PRIMARY AND SECONDARY SCHOOLS  
(INCLUDING NURSERY AND SPECIAL SCHOOLS)**

**Table A—Eye Diseases, Defective Vision and Squint**

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint ... ..	14
Errors of refraction (including squint) ...	284
Total ... ..	298
Number of pupils for whom spectacles were prescribed ... ..	142

**Table B—Diseases and Defects of Ear, Nose and Throat**

	Number of cases
Received operative treatment	
(a) for diseases of the ear ... ..	75
(b) for adenoids and chronic tonsillitis ...	289
(c) for other nose and throat conditions ...	132
Received other forms of treatment ...	91
Total ... ..	587
Total number of pupils in schools who are known to have been provided with hearing aids :	
*(a) in 1963 ... ..	—
(b) in previous years ... ..	—

\*A pupil recorded under (a) above is not recorded at (b) in respect of the supply of a hearing aid in a previous year.

**Table C—Orthopaedic and Postural Defects**

	Number of cases
(a) Pupils treated at clinics or out-patients departments ... ..	553
(b) Pupils treated at school for postural defects	—
Total	553

**Table D—Diseases of the Skin**  
(excluding uncleanness, for which see Table D of Part I)

	Number of cases known to have been treated
Ringworm—(a) Scalp ...	5
(b) Body ...	17
Seabies ... ..	—
Impetigo ... ..	13
Other skin diseases ...	5
Total	40

**Table E—Child Guidance Treatment**

	Number of Pupils
Treated at Child Guidance Clinics ...	12

**Table F—Speech Therapy**

	Number of cases
Pupils treated by speech therapists ... ..	145

Table G—Other Treatment Given

	Number of cases known to have been treated
(a) Pupils with minor ailments ... ..	—
(b) Pupils who received convalescent treatment under School Health Service arrangements ... ..	—
(c) Pupils who received B.C.G. vaccination ...	744
(d) Other than (a), (b) and (c) above ...	—
<b>TOTAL</b> ... ..	<b>744</b>

#### Part IV—DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

(1) Number of pupils inspected and re-inspected by the Authority's Dental Officers :—			
(a) At Periodic Inspections ... ..	5,802		
(b) At Specials ... ..	40	Total	5,842
(2) Number found to require treatment ... ..			4,211
(3) Number offered treatment ... ..			3,547
(4) Number actually treated ... ..			2,659
(5) Number of attendances made by pupils for treatment, excluding those shown at 11(i) below			4,923
(6) Half days devoted to :			
(a) Periodic (School) Inspection ... ..	83		
(b) Treatment ... ..	950	Total	1,033
(7) Fillings :			
(a) Permanent Teeth ... ..	2,765		
(b) Temporary Teeth ... ..	133	Total	2,898
(8) Number of Teeth filled : ... ..			
(a) Permanent Teeth ... ..	2,213		
(b) Temporary Teeth ... ..	123	Total	2,336
(9) Extractions :			
(a) Permanent Teeth ... ..	1,014		
(b) Temporary Teeth ... ..	2,351	Total	3,365
(10) Administration of general anaesthetics for extraction ... ..			1,598
(11) Orthodontics :			
(a) Cases commenced during the year ...			35
(b) Cases carried forward from previous year			27
(c) Cases completed during the year ...			9
(d) Cases discontinued during the year ...			4
(e) Pupils treated with appliances ...			48
(f) Removable appliances fitted ...			51
(g) Fixed appliances fitted ... ..			12
(h) Half days devoted to orthodontic treatment			—
(i) Total attendances ... ..			283
(12) Number of pupils supplied with artificial teeth			36
(13) Other operations :			
(a) Permanent teeth ... ..	—		
(b) Temporary teeth ... ..	—		
			603

# SCHOOL CLINICS, 1963

Clinic	Location		Number of sessions held	Total number of sessions held
	Local Authority Premises	Other Premises		
Minor ailments	—	—	—	—
Dental	Aberystwyth Aberaeron Cardigan Lampeter Llandysul Tregaron Dinas Highmead R.S.S.	— — — — — — — —	460 110 86 46 32 26 40 28	828  (This total does not include dental sessions held in classrooms of primary schools).
Ophthalmic ...	—	Aberystwyth	125	125
Orthopaedic ...	Aberystwyth Cardigan — — — — — —	— — Aberystwyth Aberaeron Lampeter Llandysul New Quay Tregaron	23 17 1 11 17 10 5 7	       91
Speech Therapy	Aberystwyth Aberystwyth C.P. School Ardwyn Cardigan C.P. Cardigan Infts. Dinas Penparcau C.P. Penparcau Infts. Tregaron Grammar Ysgol Gymraeg — —	— — — — — — — — — — — Lampeter Llandysul	25 15 8 17 14 13 8 9 7 10 12 3	           141

DETAILS OF SCHOOL VISITING BY HEALTH VISITORS, 1963

District	Schools visited for health inspection and number of times visited	Number of children examined	Number found to be verminous or suffering from minor defects
ABERYSTWYTH URBAN	Aborystwyth C.P. 13	765	14
	Yr Ysgol Gymraeg 10	522	3
	Penparcau C.P. 3	330	5
	Penparcau Infants 8	418	2
	Total 34	2,035	24
ABERYSTWYTH RURAL (Part)	Ardwyn Grammar 13	209	9
	Cominiscoch C.P. 10	414	18
	Cwmpadarn C.P. 8	432	16
	Ponparcau Infants 2	98	4
	Penparcau C.P. 2	108	9
	Total 35	1,261	56
ABERYSTWYTH RURAL (South)	Capel Seion C.P. 11	262	2
	Llanafan C.P. 13	373	1
	Llanfarian C.P. 15	573	6
	Llanilar C.P. 10	267	—
	Llanfihangel C.P. 10	304	—
	Llangwryfyon C.P. 12	190	—
	Myfenydd V.P. 21	851	24
	Mynach C.P. 10	292	2
	Ponterwyd C.P. 11	266	—
	Ysbyty Ystwyth C.P. 11	285	1
	Total 124	3,663	36
ABERYSTWYTH RURAL (North)	Borth C.P. 5	129	2
	Borth V.P. 4	101	1
	Dinas Secondary 35	1,172	24
	Eglwysfach C.P. 6	58	10
	Goginan C.P. 3	65	1
	Penllwyn C.P. 5	148	4
	Ponrhyncoch V.P. 4	167	3
	Rhydypennau C.P. 6	224	3
	Llancynfelin C.P. 6	130	4
	Talybont C.P. 4	171	3
	Trefeurig C.P. 5	47	1
	Ysgol Gymraeg 1	24	—
	Total 84	2,436	56
ABERAERON	Aberaeron C.P. 12	1,092	4
	Aboraeron Grammar —	1,650	4
	Aberarth C.P. 11	269	—
	Brynherbert C.P. 11	201	—
	Cilcennin C.P. 14	283	6
	Ciliau Parc C.P. 12	196	2
	Cofadail C.P. 11	149	2
	Cross Inn C.P. 12	205	—
	Dihowid C.P. 11	320	2
	Llanon C.P. 11	488	2
	Mydroilyn C.P. 11	294	3
	Penlon C.P. 13	534	2
	Pennant C.P. 12	114	3
	Total 141	5,795	30
CARDIGAN	Beulah C.P. 8	356	—
	Cardigan Infants 11	1,397	29
	Cardigan C.P. 12	2,021	40
	Cardigan Grammar 15	810	—
	Cardigan Secondary Mod. 10	375	4
	Llandygwydd V.P. 12	453	—
	Llochryd C.P. 11	432	—
	Penyparc C.P. 11	865	—
	Trewen C.P. 9	383	5
	Verwig 12	399	—
	Total 111	7,491	78



DETAILS OF SCHOOL VISITING BY HEALTH VISITORS, 1963—(continued)

District	Schools visited for health inspection and number of times visited	Number of children examined	Number found to be verminous or suffering from minor defects
LAMPETER	Bettws Blodrws C.P. 13	89	—
	Bwlchyllan C.P. 9	92	—
	Cellan C.P. 16	381	—
	Cribyn C.P. 9	144	—
	Felinfach C.P. 12	505	—
	Ffynnonbedr C.P. 16	1,830	4
	Gartheli C.P. 7	134	—
	Highmead Special 28	1,536	46
	Lampeter Secondary 37	2,840	7
	Llanfair C.P. 20	191	10
	Llangybi C.P. 16	254	6
	Llanwnen C.P. 10	370	—
	Silian V.P. 9	156	1
	Trefilan V.P. 9	137	—
	Total 211	8,659	74
LLANDYSUL	Aberbanc V.P. 6	321	—
	Adpar C.P. 7	213	—
	Blaenau C.P. 5	119	—
	Brongest C.P. 7	112	—
	Capel Cynon C.P. 8	123	—
	Capel Dewi C.P. 6	144	—
	Coedybryn C.P. 5	110	—
	Cwrtnewydd C.P. 5	208	1
	Llandysul C.P. 12	477	—
	Llandysul Grammar 15	705	4
	Llanwenog V.P. 7	244	—
	Pontshaen C.P. 11	372	11
	Tregroes C.P. 11	330	—
	Total 105	3,478	16
LLANGRANOG	Aberporth C.P. 6	485	4
	Blaenporth V.P. 5	154	1
	Caerwedros C.P. 4	81	1
	Glynarthen C.P. 6	165	—
	Gwenlli C.P. 6	119	—
	Llanarth C.P. 5	183	—
	Llanllwchaiarn C.P. 7	165	4
	New Quay C.P. 9	268	—
	Penmorfa C.P. 5	130	—
	Pontgarreg C.P. 5	192	—
	Rhyd Lewis C.P. 6	136	5
	Talgarreg C.P. 5	180	2
	Total 69	2,258	17
TREGARON	Bronant C.P. 14	215	—
	Castell Flemish C.P. 12	92	—
	Llanddewi Brefi C.P. 13	331	—
	Llangeitho C.P. 13	440	5
	Lledrod C.P. 13	60	—
	Penuwch C.P. 13	181	2
	Pontrhydfendigaid C.P. 13	351	1
	Swyddffynnon C.P. 13	167	1
	Tanygarreg C.P. 10	103	—
	Tregaron C.P. 11	725	2
	Tregaron Secondary 22	833	20
	Total 147	3,498	31

# REPORT OF WORK DONE BY THE ORTHOPAEDIC SISTER FOR THE YEAR 1963

AREA	No. of Clinics held during Year	Attendances			No. of home Visits	No. of Plasters		No. of cases of Remedial Exercises Manipulation and Massage
		New Cases	Others	Total		Applied	Reinforced	
Aberaeron ...	11	19	90	109	10	—	—	9
Aberystwyth	23	28	233	261	17	—	—	23
Cardigan ...	17	29	112	141	4	—	—	24
Lampeter ...	18	16	164	185	37	—	—	12
Llandysul ...	10	14	105	119	32	—	—	11
New Quay ...	5	3	29	32	5	—	—	—
Tregaron ...	7	10	56	66	9	—	—	8
TOTALS ...	91	119	789	908	114	—	—	87







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